

Continuing Formation Application Form

Revised 2008-08-01

Name _____ Date of Request _____

Address _____

Phone _____ E-Mail _____

Current Status Elder Deacon Local Pastor Diaconal Minister

Present Appointment _____

Name of Continuing Education/Formation Event _____

Date of Event _____ Sponsoring Organization _____

Total Expenses _____ Funds Available _____ Amount of Request _____

When was the last time you requested funding from Annual Conference? _____

ATTACH THE FOLLOWING DOCUMENTATION:

- Airfare quote, event registration, etc.
- Staff Pastor Parish Relations Letter
- Sponsoring Organization Registration or Participation Affirmation
- District Superintendent Letter (necessary for requests involving Ministerial Education Funds)

If no funds are available from the local church, please give explanation:

In the fall of 2006 all active pastors embarked upon a journey of self-awareness of areas of strength and areas needed for development through the 360 tool. How does this event address the need for further development identified in that tool?

Please submit a written statement of your goals and objectives for continuing formation for the coming year and how this event will specifically increase your effectiveness as a spiritual leader or growth in the coming year.

Please direct any inquiries and/or applications to: mattlake@cpcumc.org

MAIL: Pastor Matt Lake, Continuing Formation Chair

c/o

Second Avenue UM Church

130 2nd Avenue

Altoona, PA 16602-3938